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# A Critical Inquiry

INTO THE  
NATURE AND TREATMENT OF THE CASE

OF

*Her Royal Highness the Princess Charlotte  
of Wales and her Infant Son,*

WITH THE PROBABLE

CAUSES OF THEIR DEATHS,

AND THE SUBSEQUENT APPEARANCES.

THE WHOLE FULLY DISCUSSED, AND ILLUSTRATED BY COMPARATIVE PRACTICE,  
POINTING OUT THE MEANS OF PREVENTING SUCH EVILS IN FUTURE;

PARTICULARLY WORTHY THE ATTENTION OF  
THE FACULTY AND THE PUBLIC.

RESPECTFULLY DEDICATED TO  
THE IMPERIAL PARLIAMENT  
OF  
THE UNITED KINGDOM OF GREAT BRITAIN.

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“Hence 'tis we wait the wond'rous cause to find.”

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BY

REES PRICE,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS, LONDON.

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LONDON:

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## TO THE READER.

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*THE reasons which I have assigned in the annexed Introduction, I hope, will justify me to the candid and considerate Reader, for publishing this small work, on a subject which has involved the whole Nation in more affliction than any other circumstance within the lapse of many years.*

*If the arguments contained in it should in the smallest degree tend to elucidate the real causes of so fatal a termination of a simple case of labour,—a case which has been hitherto involved in so much mystery; or, if it should be the means of preventing only one similar occurrence from happening in future, my desire will be answered.*

*I must, however, on this occasion, beg to claim the particular indulgence of the public for the many inaccuracies of diction contained in the following pages; but as I considered the importance of the subject to call for urgent attention, I was induced to risk a reproach on this account, and to send the copy to the press in the rough state in which I had written it, without waiting either to revise or correct it. Truth and heartfelt sentiment, at least, will I hope be found in it.*

LONDON,  
27th Nov. 1817.

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## INTRODUCTION.

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THE fatal loss of our amiable Princess, and her infant Prince, has occasioned a very considerable sensation in the breast of every feeling person.

To the Nation, this calamitous occurrence is a loss of more magnitude than may at first sight appear; two generations of our Monarchy, in the direct lineal descent, are thus cut off; and may it not be our misfortune, at some future period, that this circumstance may lead to that anarchy and confusion, which in former times ravaged our country and occasioned so much bloodshed?

The death of both Mother and Child in Natural Labor, is a very uncommon occurrence in the present improved state of modern Midwifery, when the practice of it is confided to skilful hands. The dreadful termination of this case has therefore given rise to much dissension of both Medical and Public Opinion, as it regards the medical attendants. Some have strongly condemned their conduct, whilst others have endeavoured to exculpate them from all blame, alledging, that the events which took place were natural occurrences. Every one, however, has evinced the deepest sorrow, and a painful anxiety to ascertain by every trivial circumstance made public, whether the Princess and her Infant were judiciously treated or not.

In the more recent stage of this affair, my opinion as a professional man was frequently asked, with regard to this melancholy business; and the only answer I felt myself justified in making in the absence of facts, was, that the respectability of the medical gentlemen in attendance, their long standing in the Profession, and their very names, ought to remove all doubts on this head. This general answer, however, appeared extremely unsatisfactory. It is then amid these exalted names we have lost an amiable Princess, and two Heirs to the Throne, in a common natural labour—was the kind of reply I usually received.

In this painful suspense, I was in hopes the public mind would have been satisfied in this particular, by such a report from the professional gentlemen, as they could consistently publish; and that this might probably have exculpated them from the opprobrium under which they laboured, and have demonstrated that their Royal Patient, and the young Prince, were treated with every effort for their welfare, which human energy, ability, and prudence could suggest. In this hope, however, I was disappointed, and the public has merely been able to lay hold of detached accounts on a subject of such importance to the Nation.

I should have abstained from giving any opinion, or offering any remarks on the case, had it not been from the statements of some facts contained in the Morning Chronicle of Monday, the 10th inst. (Nov.) and others subsequently, which struck me very forcibly. These statements detailed among other things, the extraordinary means resorted to for the purpose of resuscitating the still-born infant. That such treat-



ment should have been adopted in the year One Thousand Eight Hundred and Seventeen, by men of exalted professional rank, surprized me more than I can express, more especially when the life of no less a personage was at stake than a future King of Great Britain.

The following is an extract of one of the paragraphs to which I allude:—

“Great pains were taken by Dr. Sims and Dr. Baillie to re-animate the child, for which purpose *it was conveyed to them in an adjoining apartment!!!* But all their efforts were ineffectual, and *it appeared probable, that it had been dead for some hours before delivery!*”

This detail of a practice both novel and futile, roused my attention to endeavour to ascertain the correctness of it, and also of other circumstances connected with these extraordinary proceedings. I found that they were not only correct, but avowed by some of the Medical Gentlemen themselves. In my researches I also ascertained other points of practice, adopted in the case of the Princess, which have no less astonished me, and have my most decided disapprobation.

These considerations induced me to hope, that ere this the subject would have been taken up by some more able hand. In this expectation, however, I have been disappointed. We have, it is true, read a very well written letter in the Newspapers, from an able practitioner, recommending that a public inquiry be instituted; but which does not discuss the points in question. I therefore resolved to collect all the information which has been published



revelant to the treatment of the case, and such oral information as I could obtain. In my latter researches I have been rather successful. These will follow in due order, divested of extraneous matter, and afterwards the treatment will be impartially discussed, point by point; and I shall conclude this Essay with a few general observations on the most successful means of treating similar cases, and remarks on the unfortunate one before us. Various reasons impel me to address the public on this unfortunate occasion; one is, that it may be a mean of leading us to a discovery of the real causes, and thus avoid the like occurrences in future. This I conceive to be the more necessary, because I understand some of the medical gentlemen have affirmed, that they are so conscious they are justifiable in the treatment they adopted, that had they now to treat the same case, they would not deviate from the same course. Another motive is, to prevent the promulgation of a point of practice, (the means taken for the recovery of the child) which I have no hesitation in asserting is founded in error, and must, I conceive, always prove unsuccessful.

I have viewed with surprise the weakness of the measures taken by Sir Richard Croft, his friends and partizans, to gloss over a subject which has involved the Nation in such affliction, and his own character in so much censure. Measures, which can merely be intended to obstruct scientific researches and inquiries into the circumstances that led to the fatal catastrophe. The public mind at this period is become enlightened, and it must and will be satisfied of the real causes, and nothing but the real causes. Some have said, this is an unfit subject for inquiry: a little reflection will show them their error. It may be too delicate a subject for Sir Richard Croft to wish any inquiry to be made into, but not for the public at large. Does



not every sound principle of humanity and science, call upon us for investigation? Ought we to be deterred, by notions of false delicacy, from inquiring, if there be still unexplored in the science of Midwifery, a hidden rock whereon we may founder? Are the lives of the weaker sex, and their offspring, to continue in jeopardy, because we are told it is a subject too delicate for inquiry? This would be inhuman in the extreme, and is fraught with ignorance. It would be unpardonable if every man of the art did not lend his assistance to discover that rock, and fix upon it a beacon, which may in future guide the practitioner. But the most unfair means resorted to, are those of introducing Religion as a veil to cover this unfortunate event; a subject which always touches our most tender feelings. To me it appears highly improper to introduce religious matters with an intention to thwart truth and science; It is a motive unworthy the enlightened practice of midwifery of the nineteenth century.

“There have been,” says an Evening paper, “so many rumours diffused by *malevolence* and eagerly adopted by *credulity and ignorance*!! that it is full time to check their circulation. We are inclined to believe, that all possible aid was rendered to the departed Princess, by her Medical Attendants: but the public mind appears strongly agitated by the subject, and can only be appeased by a full conviction that the dreadful event was the will of heaven, and was not in any respect occasioned, or accelerated, by human error or neglect.”

The writer of this paragraph is much mistaken in a public so enlightened, if he conceives he can twist their ideas and understandings to any purpose



he may please. The English Nation is neither so *credulous, ignorant, nor malevolent*, as he charges them; and before we can possibly be justified in going to such lengths, as to say that the Almighty, in his wrath against the House of Brunswick, had resolved to cut off two generations at once, and those too whom we have a right to presume, had never offended him, and that the exalted talents of Dr. Croft should be paralyzed, we must be convinced that the nature of the case really was beyond the reach of human assistance. For the Almighty, for wise reasons no doubt, has ordered labour to vary in its kind, and an appropriate treatment for each: and has enlightened and endowed man with more power and independence in this respect, than some of these enthusiasts would have us believe. God forbid that the wrath of Heaven should ever be thus sent down upon the family of our August Sovereign. When the public has ascertained that the case really was supernatural and beyond the reach of human power, then, and not till then, will it believe that such a heavy affliction was intended to fall upon our country. Enough has appeared to induce the public to surmise, that the case was not altogether of that kind. Enough has also appeared to satisfy us, that only one man had the management of the case during the whole labour; and are we to take it for granted, with these suspicions staring us in the face, that the abilities of this *one accoucheur* are superior to other men's? Above all error! and this we *must* believe, too, without due investigation! and, that where *he* proves unsuccessful, it *must* be owing to the Will of Heaven. The public will not credit such reasoning, and the Faculty have yet to learn what claim this *Accoucheur* has to greater abilities than his brethren. Are they to judge by the *success* of his practice?



That such means should be made use of to back out of so unfortunate a case, I conceive to be a bad precedent, and I should not be surprized to find these lame excuses adopted in future, to cover many a blunder, in the practice of midwifery, which has led to unfortunate results. May it not lead to a kind of apathy and inattention among practitioners in their studies and exertions? For, if at any time, in consequence of ignorance or inattention, they lose a few patients, they will have nothing to do, but to attribute those occurrences to the Will of Heaven! and should this prove unsatisfactory, they will be able to affirm it, by taking an old newspaper from their pockets, and referring to the case of the unfortunate Princess Charlotte, as affirmed by the GREAT Physicians in London; and this will of course set the matter at rest. Heretofore, such excuses would little avail a practitioner, in attending persons, even in humble life; nay, many a man has lost his practice in consequence of a similar occurrence; and I cannot help thinking, that it would, under any circumstance, be more manly if a practitioner falls into an error, to confess it, rather than tamper with the sacred name of Divine Providence to get himself out of the discredit of it. If the commander of an army loses a battle in consequence of improvident measures, it would avail him but little to say it was the Will of Heaven. The matter would be investigated, and the country satisfied, that human exertions and ability were not wanting. Nor would it signify whether his name stood high or low in his profession! And is not this a more fit subject for inquiry, and ought it not to be inquired into by the nation and the faculty? But then we have been told by some of the public prints, that these gentlemen's names stand so high, that they are placed above all inquiry; and that they are certain every thing was done to save the Princess and her Infant



which possibly could be done. The public might here be permitted to make the same reply to the latter sweeping assertion, that one of our learned Judges lately made when examining a witness who appeared against a criminal. To a question from his Lordship as to how he knew the circumstance to be true, he said, "O, I am convinced of it." "Aye," said his Lordship, "but I must be convinced of it too."

And with respect to great names, I recollect some seven or eight years ago another very exalted medical name, who considered himself also above inquiry. This worthy baronet was President of the College of Physicians, First Physician to his Majesty, and Physician General to the Army. On the expedition to Walcheren, a damp, swampy country, natural causes of Ague and Intermittent Fevers, those disorders raged so violently among our troops that hundreds, nay I believe thousands died. Much complaint was made by the army surgeons of the ill arrangements and improvident measures of the Army Medical Board, and the business ultimately came before Parliament, to inquire into the cause of our losing so many men. This gentleman, whose name stood so high in the profession, was examined before a Committee of the House of Commons. On the question being put as to the probable quantity of bark per man necessary to cure an intermittent fever, he could not inform them;—not even whether it would require one ounce, or one pound: and he was obliged to confess, although *Physician General to the Army, and President of the Army Medical Board*, "that he knew nothing respecting Contagious Fevers peculiar to Camps and Armies, further than from perusing a book written on that subject by Sir John Pringle, formerly Physician to the Army." I need not add, that his important services in these different depart-



ments were afterwards dispensed with. And I do hope, that an inquiry will be instituted into the treatment and management of this sad event also.

But I have seen it observed in the papers, that no such inquiry can possibly take place ;—that we have no tribunal vested with power to inquire into the circumstances\*. That the nation is to lose two Heirs to the Throne, and all it has a right to know on the subject is, that one died at nine o'clock at night and the other at two the next morning—is a maxim to which I cannot assent. This is not the case of an ordinary individual ; it is a State and a National concern, and I may be permitted to hope that our Imperial Parliament is vested with ample powers to inquire into the causes which led to the untimely death of two presumptive Heirs to the Crown. The gentlemen themselves ought to court such investigation ; because, I should hope, it would be a means of restoring them to public confidence.

The Imperial Parliament would of course take such measures as would appear to their wisdom most proper ; but if I may be permitted to give my humble opinion, I would suggest, the examination of every person who had any knowledge of the case, by men of the art, chosen by the Honourable House of Commons, in the presence of their Committee ; and the treatment employed on this occasion, compared with the treatment necessary to be adopted in similar cases.

If the management of this unfortunate case was really conducted upon the best principles, I cannot see the necessity for so much contradiction in the

\* Some years ago a plan was in agitation to establish an Obstetrical College in London, for the examination of every person before he should practise that art.



statements of it. Truth alone would have borne them out. At first, the child was ascertained to be living up to a few moments before it was born; but after the reanimating process failed, it was then ascertained to have been dead some hours before delivery. We were next informed, that Dr. Croft and the other gentlemen were all gone to bed when it was discovered by the nurse, the Princess was dying; but some blame being attached on that account, he was then never out of the room for more than ten minutes at once during the whole time!! Next, the natural symptoms of dissolution, the consequence of exhaustion, were called an attack of Spasm—an undefined phraseological term: and now latterly, that so much has been said respecting a mother and infant dying in a natural labor, we are told, it was a *cross-birth*.

The first seeming contradictions, I shall discuss in their proper places. The last statement, I shall take no farther notice of, than flatly to contradict it. This latter circumstance reminds me of a very young practitioner who settled in a small country town, and the first labour he attended was a cross birth. He saved the mother, but from inexperience was not expert enough to save the child. He was fearful this circumstance would prejudice him in midwifery practice, as there was much said on the subject. Happening to mention these fears to a lady of some experience, she advised him to give out that this was an extraordinary bad case.—He did so, and he was *then* considered a young man of wonderful abilities!

And does it not seem probable, that these gentlemen have taken the advantage of a similar lesson? Happening to know that the case was *not* a cross-



birth, I speak without the fear of contradiction; but if I had been unacquainted with that circumstance, there is already sufficient evidence before the public to the contrary. In that case, where would have been the necessity of the Ministers of State, who were in a distant part of the house, when they were informed of the birth, and the manner in which it had been accomplished, expressing "great satisfaction that the child had come in the *natural way*, and that it had not been found necessary to resort to artificial means." This would have been directly contrary to the real facts of the case. But even if it had been a cross-birth, there would still remain very much indeed to be explained, for so awful a termination of it. Our accoucheurs of the day lift a sarcastic smile at these proceedings; and what will the Faculty of foreign nations think of the state of Midwifery in this country, if the cause of this lamentable case be not satisfactorily made out?

Let us then divest ourselves of all prejudices on the one hand, and turn aside all unfair subterfuges on the other; and let the case in the course of the following pages rest upon its own merits.







# A CRITICAL INQUIRY, &c.

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*Observations on the Constitution of the Princess Charlotte,  
and her Treatment during Pregnancy.*

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WE have heard much of the strong and robust constitution of the Princess, and of the repeated blood-lettings which were on this account resorted to, especially *during the last few weeks of her pregnancy*; and that on account of the quantity of adipose substance, those bleedings, *although four attempts were made* by Mr. Nevill on one of these occasions, could not be effected in the arm, but were performed in the back of the hand!! I have only seen the Princess twice; once when she was a child, and the last time, shortly after her marriage. On the latter occasion, she was returning her wedding visit to the Duke and Princess Sophia of Gloucester, when I chanced to be passing by the Duke's house. I was very near to her Royal Highness, just as Prince Saxe-Cobourg assisted her into their curricule. The impression then made upon my mind was, that the Princess was not only of a very delicate habit, but even of a debilitated constitution. The swelling of the knee-joint, under which her Royal Highness so long laboured, and had then recently recovered from, was a confirmation of this opinion;—an affection which, every surgeon ought to know, is constitutional, and depending upon a debilitated state.

With regard to the propriety of repeated blood-let-



tings during the various stages of pregnancy, that is a circumstance which involves many important considerations. During the first four or five months of pregnancy, natural obstructions sometimes occasion that fullness in the arterial and venous systems, which is incompatible with good health; and one or more blood-lettings and other evacuations about this period, are therefore often proper and useful; but in general, after this period, all this overcharge of vital fluid is required for the nourishment and support of the infant, who now begins to require considerable support. Blood-letting, after this time, is very rarely proper, or indeed can be employed with benefit or safety, except under some very peculiar circumstances. It is a practice which must at any rate tend to debilitate the constitution, and render the patient less able to sustain herself through the arduous undertaking of a lingering and painful labour.

It is therefore more than probable, that these repeated bleedings must have greatly debilitated the Princess, and so impoverished the blood as to give rise to that effusion of the serous or watery part of it into the *pericardium*\*, which was discovered on opening the body, and which some have endeavoured to adduce as the cause of the Princess's death. The quantity, however, was too inconsiderable to create any fatal effect; and to say the most, the only injury which could have arisen from it was, that in the exhausted state to which the Princess was reduced by the labour, it might have had some influence by its pressure on the heart, in retarding a reaction of the system. I attach little importance to the discovery of that fluid.

\* It is by no means unusual to find on dissection this quantity of serum in the *pericardium*, more especially in persons who have come by their death by any sudden violence, or by a very short and acute illness. In these cases the exudation of this fluid takes place immediately after death.



*Of the Preparations for the Accouchement of Her  
Royal Highness.*

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Although the medical attendants upon the Princess have not published any official statement of this unfortunate affair, yet several demi-official attempts at justification, and statements, have been published, either with the view of backing out of the discredit of the case, or of endeavouring to throw the blame upon others. One of these demi-official communications is as follows:

“ It will scarcely be credited, that there was not one  
“ Lady, or even Female Domestic, resident at Claremont,  
“ whose experience could authorize her to be useful to the  
“ Princess, during her pregnancy, or labour. *Not one of*  
“ *them was a Mother.* Strange also it certainly was, that  
“ her Royal Highness was left to the care of only one  
“ Accoucheur, at a distance of sixteen miles from Lon-  
“ don; so that no provision was made for any illness of  
“ that one, through long watchfulness or other accident.  
“ Dr Sims was only sent for from town *long after* the  
“ patient’s sufferings had commenced, *and was then only*  
“ *in readiness for consultation*, but did not assist in the  
“ delivery. If at any moment of the forty-eight hours  
“ that her Royal Highness was in labour, it had been  
“ thought advisable by Sir Richard Croft to have recourse  
“ to art, could he, in the absence of the Royal Parent,  
“ and all the members of the Royal Family, take upon  
“ himself the awful responsibility of doing that which, in  
“ a private case, he would have felt it his duty to under-  
“ take without scruple? We do not say that such a mo-  
“ ment arrived; but it ought to have been provided  
“ for” !!

Some of the public prints have also endeavoured to insinuate, that neither the medical nor the female attendants upon the Princess were of her Royal High-

ness's own choice, but were appointed by Her Majesty, and other branches of the Royal Family. This, however, has been contradicted by the government prints; and it is stated that the Princess and Prince Leopold had a voice in the choice of all the attendants.

Sir Richard Croft was appointed the Accoucheur, and took up his abode at Claremont for about three weeks before the accouchement took place. The female attendants were Lady (John) Thynne and Mrs. Campbell, as companions, and Mrs. Griffiths as nurse.

During this three weeks' residence at Claremont, Sir Richard must frequently have reflected on the high responsibility of the trusts reposed in him; the eyes of the nation were fixed upon him, and the faculty were disposed to view every circumstance attending the case with a scrutinizing eye. A question must naturally arise here, for what purpose was Sir Richard Croft appointed Accoucheur to the Princess long before his professional aid was required; and what ought to have occupied his thoughts and attention for those three weeks he resided at Claremont? The answer is obvious. If a person be appointed to execute a matter of high trust, it is presumed also that he has a capacity to direct and conduct all collateral and contingent circumstances dependent upon it, or which may arise in its ultimate execution. If, therefore, a person be engaged to perform any undertaking, is it to be expected that he must be instructed like a school-boy, in all the minutiae consequent upon it, and that too, by persons unacquainted with his art? Could he expect either arrangement or preparation to be made, or occur, to his young Royal Patient, only twenty-two years of age, and wholly unacquainted with midwifery concerns?

If Sir Richard Croft were not consulted in the first instance, with regard to the female attendants and nurse of her Royal Highness, as I have reason to believe he was, *it could not have escaped his observation, during a*



*three weeks' residence among them, that neither of the Ladies, nor the Nurse, was a Mother!!* and that it would be necessary to have at least one attendant, who had been the mother of children, a lady of ability and of rank, who could have directed and influenced the proceedings and preparations. Ought we not also fairly to presume, that knowing the many casualties dependent upon labour, in which the council, nay, even the assistance, of two practitioners, may be useful; that it would occur to Dr. Croft, in the course of these three weeks, that it would be prudent to have another accoucheur in attendance at or near Claremont. These considerations formed part of the duties confided in him, and no man can possibly believe but that his suggestions and advice on these subjects would have been instantly attended to by every branch of the Royal Family.

Every practitioner, on going to a labour, must always be proud to meet on such occasions, in addition to a good nurse, a female friend of the patient, the mother of eight or ten children, about forty or fifty years of age, of a strong robust constitution, capable of sustaining the fatigue of sitting up one or even two nights if necessary, assisting in the performance of many good offices, particularly in the ceremony of supporting the back, in cheering and animating the patient, and rousing her from that dulness and depression of spirits which the presence of timid females, or sameness of thought, would naturally give rise to.

The presence of females who have not borne children, or have had little or no experience in these matters, is hurtful; they are timid, and when the pains become strong, not only alarm themselves about dangers which have no existence, but the patient also. Probably, too, they will become pale, faint, or sick; or by their importunities may prove no small annoyance to the practitioner. They are, at best, seldom of little or any service in the chamber of such patients.

That the Princess must have had a female friend of this kind is most probable; but if not, there is scarcely a lady in England but would proudly have attended on so important an occasion, had it been desired. "That a seeming want of due foresight (observes the editor of a paper called the News) as to consequences to which all are more or less liable in similar situations, distinguished this unfortunate accouchement, no one is disposed to deny."

Much stress has been laid on the circumstance of none of the Royal Family having been present at Claremont; and even the venerable Queen, and the Royal Father of the Princess, have not escaped censure on this account. With respect to the Queen, the age of Her Majesty, and her debilitated state of health, would have rendered attendance at a tedious and painful labour of so near a relative, not only hurtful, but even dangerous to Her Majesty's health. If, however, the Queen had fortunately been within the reach of consultation, Her Majesty might have seen the propriety of Dr. Sims being permitted to go into the room\*; and probably by his advice, the labour might not wholly have been left to nature, which it appears could not be accomplished but at the expence of two valuable lives.

The attendance too of any of the Princesses would have been useless, they not being mothers.

Then comes the complaint, of the absence of His Royal Highness the Prince Regent. Let every man put it to his own feelings, if he would be in the way on such an occasion? But the most extraordinary attempt of justification, contained in one of these reports, is the one

\* Dr. Sims, although in attendance for twenty and a half long hours of arduous pain, in an adjoining room, and *signing all the Bulletins*, never went into the Princess's chamber until it was discovered by Mrs. Griffiths, the nurse, that the Princess was dying.



which states, that if at any moment of the forty-eight hours the Princess was in labour, it had been thought advisable by Sir Richard Croft to have recourse to art, could he, in the absence of the Royal Parent, and all the members of the Royal Family, take upon himself the awful responsibility of doing it!! This kind of reasoning is truly ridiculous. Sir Richard Croft was appointed accoucheur to her Royal Highness, from his high professional name, or other recommendation; and, it was presumed, no doubt, that he was possessed of sufficient ability, energy, and prudence, to act according to the circumstances of the case, whatever they may have been: for, if it had been intended, that under all circumstances the case should be left wholly to Nature and to the Will of Divine Providence, unassisted by the agency of man, the Princess might have been spared the disagreeable feelings of having a male accoucheur, as she might have had a person of her own sex, who would have answered equally as well for such a purpose. If this was intended as an excuse to veil over any inefficient and indecisive practice, it is a very lame one. Will any person believe it was ever intended, that the Princess's case should be left wholly to Nature, let the case be what it would, without consulting the Royal Parent and the Royal Family? The delay of this, under any circumstances, might probably have been fatal. Dr. Croft, no doubt, was called upon to do his duty. The Royal Family and the nation expected it of him. We cannot presume that the Prince Regent and the Royal Family are versed in the science of midwifery, they therefore would be incapable of giving advice on such a subject. Besides, would such be a fair question to put to the feelings of a parent? "Sir, your daughter has now been in labour forty hours; her strength is considerably exhausted. I fear if I leave the labour wholly to Nature, although the pains may by a still longer pro-

traction, possibly accomplish it; yet she will, after delivery, sink under extreme weakness. The labour is natural and fair, but I shall be able, by a little careful artificial assistance, without any additional pain to the mother, or injury of either, so to assist the pains, as to forward the labour as much in one pain, as Nature herself would do in fifty; and shall thus be able to preserve sufficient strength for reaction after the labour is terminated. Besides, too, I am apprehensive, that from the languid state of the mother, a delay might risk the safety of the child. Will you therefore permit me to use any aid?" These would be silly and improper questions to rack the feelings of a father with. The answers a person would receive, would vary according to the fortitude, and the strength of imagination of the parent. One father would say, "I shall have no instruments used about my daughter; if it please God to take her, be it so." Another would say, "Had you not better take the concurrence of another practitioner, and act accordingly?" Another would say, "Why really, Sir, these are matters I don't understand, I would wish every thing to be done for the best to preserve their lives. I have every confidence in your judgment and prudence, and you will therefore act as you think best." What would have been the probable answer of the Prince Regent, or any of the Royal Family.—"You will take the advice of the other accoucheurs, and adopt such measures for the safety of the Princess, and child also, if possible, as you shall decide upon, and which you will carefully and promptly pursue." These kinds of questions would on many accounts be highly improper; they would not only torture the feelings of the friends of the patient, unnecessarily, concerning what they could not understand, but would create the greatest alarm and consternation, and probably crying and fainting. It would soon be whispered to the patient herself—"The doctor is going to use instruments." This would be



told as a secret to every person in the house, "There is great danger &c.," which would probably so terrify the patient and every one else, that the pains would cease, and the practitioner would then have to complete the labour without the powerful aid of Nature. Would it not be more prudent to terminate the labour in a way which reason and science dictate for the safety of the patient, and then you may communicate the joyful tidings, that by your skill and assistance, you had been the means of saving two lives which must otherwise have perished?

After terminating a labour in this happy way, would it not be more pleasing to communicate the intelligence, that the mother and child were BOTH "*doing extremely well*," than to allow a mother or child, or perhaps both, to perish, by leaving too much to the efforts of Nature? What would then be the expression of the parent or friend? "Thank you, Sir, for your exertions; I don't care how it was accomplished, so that it is all right now."

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*Of the Commencement and Nature of the Labour of Her Royal Highness, its Duration, Management, and awful Termination, as collected from all the Accounts which have been published, divested of extraneous Matter, as well as from private Information.*

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The first symptom of the approaching labour of the Princess took place on Sunday; but her Royal Highness was enabled to take her usual airing in the Park. On the Monday, the labour became more evident, though she had only slight pains during that day, and part of the ensuing night.

About three o'clock, however, on Tuesday morning

the labour came on in earnest, and Sir Richard Croft dispatched a servant for Dr. Baillie, to be in attendance in an adjoining room, to consult upon any medical point, in case such a consultation should be found necessary, Dr. Baillie not being a practical accoucheur. The Doctor arrived about seven o'clock. A letter was also written by Dr. Croft this morning to Dr. Sims, an accoucheur, to come to Claremont. This letter it appears, for reasons which have not been explained, was not sent off *till late on Tuesday evening*; so that it was two o'clock on *Wednesday morning* before Dr. Sims arrived.

It appears that the labour, although lingering, was no other than a common natural one, but of that nature usually denominated by accoucheurs, *the milder degree of Laborious Labour*; the usual treatment, management, and termination of which, I shall hereafter speak of. The presentation was fair, the pains continued good from three o'clock on Tuesday morning till Wednesday morning, when the following Bulletin was issued, *signed by Dr. Sims although he had not seen the Patient!!*

“ Claremont, Wednesday morning, eight o'clock.

“ The Labour of Her Royal Highness the Princess  
“ Charlotte is going on very slowly, but we trust, favour-  
“ ably.

(signed)

“ M. BAILLIE!

“ RICHARD CROFT.

“ JOHN SIMS!”

Another Bulletin was issued in the afternoon of the same day, which was also, as well as the subsequent one, *signed by Drs. Baillie and Sims.*

“ Claremont, Nov. 5, 1817, Wednesday, half past  
“ Five, P. M.

“ The Labour of Her Royal Highness the Princess  
“ Charlotte has, within the last three or four hours, con-



“siderably advanced, and will, it is hoped, within a few  
“hours, be happily completed.

(signed)

“M. BAILLIE!

“R. CROFT.

“JOHN SIMS!”

“Claremont, Nov. 5, Ten o'clock, P.M.

“At nine o'clock this evening, Her Royal Highness  
“the Princess Charlotte was delivered of a still-born  
“Male Child. Her Royal Highness *is doing* EXTREME-  
“LY WELL!!

(signed)

“M. BAILLIE!

“R. CROFT.

“JOHN SIMS!”

Several dispatches from Claremont, which we may look upon as official communications, appeared in all the papers of Friday, the 7th of November. The first is dated Claremont, Thursday morning, six o'clock. I extract the following.

“About six o'clock yesterday (Wednesday) the labour  
“advanced more rapidly, *and no apprehensions were en-*  
“*tertained* of any fatal result, *and the child was ascer-*  
“*tained to be still living.* At nine o'clock in the evening  
“her Royal Highness was delivered of a male child still-  
“born. Throughout the whole of this long and painful  
“labour, her Royal Highness evinced the greatest firm-  
“ness, and received the communication of her child  
“being dead-born with much resignation.

“The Princess was composed after her delivery, and  
“though of course much exhausted, every hope was en-  
“tertained of her doing well.

“A little after twelve a change was observed in her  
“Royal Highness; her quiet left her; she became rest-  
“less and uneasy; and the medical attendants felt alarm-  
“ed. From half past twelve, restlessness and convulsions  
“increased till nature and life were quite exhausted, and

“ her Royal Highness expired at half past two this morning.”

The second is dated Claremont, Thursday morning, seven o'clock.

“ Her Royal Highness, after her delivery, had expressed herself resigned to the child lying dead. She continued remarkably well from nine o'clock (the time of her delivery) till past twelve o'clock, probably a quarter past, when the *medical gentlemen, Drs. Baillie, Croft, and Sims, considering that she could not be doing better under the circumstances, retired to rest!* Her Royal Highness took some gruel, and expressed herself inclined to sleep; however, on the gruel being given her, she expressed herself to find a difficulty in swallowing it. The Princess afterwards complained of being very chilly, and of a pain at her stomach. *The nurse, Mrs. Griffiths, considering her Royal Highness's complaints to require the advice of the medical gentlemen in attendance, the Doctors were ALL instantly called up. THEY* lost no time in giving their attendance; but human assistance was of no avail. Her Royal Highness's attack continued unabated, and she expired at half past two o'clock, in a severe attack of Spasms.”

Extract of another letter, dated Claremont, Thursday, 4, P. M.

“ *Sir Richard Croft, Dr. Baillie, and Dr. Sims, had retired to their bed-rooms!!*

“ *It was then past twelve o'clock, and it was considered by the medical gentlemen, that the Princess wanted no more assistance than Mrs. Griffiths, the nurse, could render her; and that during the remainder of the night she should be kept as quiet and as composed as possible!* Her Royal Highness had previously expressed herself perfectly composed after receiving the intelligence of her infant being still-born.

“ She afterwards complained of a severe chillness and



“ pain at her chest, *which proved to be spasms*; and the  
 “ Princess appeared so unwell that the nurse thought it  
 “ her duty to call the medical gentlemen, who lost no  
 “ time in repairing to the Princess’s bed-room.”

“ Her Royal Highness lay half an hour, from a little  
 “ before two o’clock till near half past, from the time she  
 “ was taken, without speaking, supposed to have lost the  
 “ power of it; but appeared perfectly sensible and com-  
 “ posed, and also that her dissolution was approaching.”

A weekly paper contains the following particulars, which it states *they are authorized to make*. I shall with pain extract such as are relevant to the case, whereon to make a few remarks.

“ We are enabled, from accounts transmitted in a mo-  
 “ ment of less confusion, to add a few particulars, and to  
 “ make some corrections in those we have already de-  
 “ tailed. In the first place, we are AUTHORIZED to  
 “ state, that her Royal Highness was not delivered with  
 “ instruments, but by her own pains; that *it was supect-*  
 “ *ed in the forenoon of Wednesday*, that the infant was  
 “ dead; and that Sir R. Croft never quitted the room for  
 “ a longer space of time than ten minutes!!

“ For fifty-one hours (continues the same paper) did  
 “ this interesting and lamented Princess struggle in the  
 “ pains of labour. During this time the members of the  
 “ privy council were in an adjoining room, and the me-  
 “ dical gentlemen in constant communication with them  
 “ respecting the progress of the case. When it was an-  
 “ nounced to them that the birth had taken place, but  
 “ the infant was still-born, great pleasure was expressed  
 “ that it had come in the natural way, and that it had not  
 “ been found necessary to employ extraordinary means.  
 “ *In fact, it had been perfectly ascertained for some time*  
 “ *previous to the birth, that the child was dead!* The in-  
 “ fant was instantly conveyed into an adjoining room  
 “ *by the physicians, and the most approved means for assist-*

“ing or restoring animation! (among which is that of rubbing the body with salt and mustard,) were resorted to, but without success!! In fact, the child was dead before it entered the world. The experiment was therefore tried, to leave nothing undone.

“The Royal Mother bore the disappointment with fortitude and pious resignation. Her state appeared so favourable, that *Drs. Baillie and Sims retired into an adjoining room!*

“Soon after twelve the fatal change took place; difficulty of breathing came on, and her chest was observed to heave with violence. The two medical attendants from the next room instantly joined Sir Richard Croft, and every remedy which their united skill could devise, was sedulously applied. Her Royal Highness is stated to have remained sensible to the last minute of her life. She was taken with dangerous spasms about one o’clock. Before she died, the Princess said to her medical attendants, ‘Am I in any danger?’ They replied, that they requested her Royal Highness to *compose herself!* She breathed a gentle sigh, and expired.”

The same paper justly observes, that the informing the Princess, in her very alarming situation, that the child was dead, “appears to our vulgar notions and feelings, reprehensible.”

“We believe in such cases, it is common and usual to put forth an innocent deceit, until the suffering parent is beyond the reach of the danger naturally arising from the shock of such a communication at such a moment. All was, beyond a question, done for the best; but we cannot help saying, that no similar affair, within our knowledge, was ever conducted with so little a view to possible consequences.”

In a preceding part of the same paper it is stated, that “At six o’clock the preceding evening, (Tuesday) the throes of child-birth had become more decisive; and



“ the child was then, and it is said, *even up to a few minutes before its birth, ascertained to be living!* At its birth it was found to be a perfect, fine-formed, male infant.

“ After the birth her Royal Highness appeared so tranquil and composed, that between twelve and one *the medical gentlemen had retired to rest!* The cabinet ministers also, having full reason to believe that all danger was over, had left Claremont soon after eleven o'clock, but were afterwards recalled. The first symptom of approaching danger is said to have been observed on some gruel being presented to her, which she found a difficulty in swallowing; cold and spasms succeeded. *The physicians were called up;* but their aid was in vain. For the last half hour her spasms are said to have subsided; she sunk into a calm composure, speechless, but apparently not insensible. At half past two she was no more.”

Another document, which I have ascertained was published from information collected immediately from a person acquainted with the whole circumstances of the case, is as follows.

“ It was from the first anticipated by Sir Richard Croft that the labour would be protracted, and on Tuesday morning he wrote to Dr. Sims to assist in consultation, if artificial means should be judged necessary. But this letter was not dispatched till nine o'clock in the evening of that day; and consequently he did not arrive till two o'clock the next morning. It is lamentable to think, that the confinement of a Princess upon whose life and happy delivery such national importance attached, should be at such a distance; or if Claremont was preferred\*, it ought to have occurred, that a second

\* It will be recollected, that some months previous to the accouchement of the Princess, his Serene Highness the Prince of Saxe Cobourg took a survey of Marlborough House, which his Se-

“ physician should have been previously resident at  
 “ Claremont, to familiarize her Royal Highness to his  
 “ sight, since in that case they might both have assisted  
 “ in the perilous moment.

“ We now learn from Claremont, that *though Dr. Sims*  
 “ *was there all Wednesday, for the purpose of consultation,*  
 “ *he was not called into the chamber at any period of the*  
 “ *labour, nor at the delivery!!* Perhaps, as he had not  
 “ been introduced to her Royal Highness beforehand, it  
 “ was thought that the appearance of a stranger might  
 “ alarm and discompose her. We have no doubt but  
 “ every thing was done for the best at the time; but the  
 “ preparations were not made with sufficient regard to  
 “ the unexampled importance of the case. We ought  
 “ not to be deterred by delicacy from saying, that through  
 “ the whole course of her pregnancy, her Royal Highness  
 “ ought to have had the society of ladies of rank and ex-  
 “ perience, chosen by herself, who from the confidence  
 “ reposed in them by the Princess, might have had in-  
 “ fluence in directing the proper treatment to be observ-  
 “ ed. The ladies of her household were not of her own  
 “ choice.”

Another of these accounts runs thus. “ During the  
 “ time the Princess was in labour, THEY SAW no symp-  
 “ toms to create alarm. The labour was lingering, but  
 “ deemed safe. Dr. Sims was sent for to be in readiness  
 “ in case it should be found necessary to have recourse  
 “ to artificial means; but *he saw! no reason to depart from*  
 “ *the course that had been pursued, and was of opinion*  
 “ *with the other gentlemen, that the labour would be hap-*  
 “ *pily completed*”!!

rene Highness had taken, and which was then undergoing repairs ;  
 and he conceived that it could not be made sufficiently comfort-  
 able for the reception of the Princess previous to her accouche-  
 ment.



*General Observations on the Princess's Labour, its Treatment and Management.*

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I have gone through the various accounts which have been published of this unfortunate business with the greatest care, and painful feelings; and I have endeavoured, among the contradictory statements, to come at the real facts of the case. I have also by diligence obtained that private information which has put me in possession of the principal bearings of it, and which has the better enabled me to know what are really facts, and what are otherwise.

It appears, as I have already mentioned, that the Princess was taken ill on *Monday morning*; but during the whole of that day and part of the night, there were only occasional pains; a usual circumstance with a first child. Very early in the morning of Tuesday, however, (two o'clock) the labour came on rapidly; the pains had become strong, and followed in quick succession. Dr. Baillie was sent for, to be in readiness to consult upon any medical point, if deemed necessary. The first stage of the labour was early completed; that is, I understand, early in the morning of Tuesday; and about *nine o'clock of that morning*, Dr. Croft, it is stated, finding that although the pains were strong, no further progress was made in the labour, wrote a letter to Dr. Sims, to come to Claremont. This letter was not sent off *till nine in the evening*, twelve hours *after* it was written; probably because Dr. Croft was doubtful as to the issue of the labour, especially as from six o'clock this morning it had become very strong; or he wished if possible, perhaps, to keep the honour wholly to himself. The distance to be travelled before Dr. Sims could reach Claremont was thirty-two miles; so that he did not reach that place before two o'clock on Wednesday morning;

viz. *five hours* after the departure of the messenger, *seventeen after the letter was written, and twenty-three hours after the Princess had been in strong labour!!*

Although unfavourable symptoms, it is said, had induced Dr. Croft to write to Dr. Sims as early as Tuesday morning, yet even when that gentleman arrived *he was not asked into the Princess's chamber, and never saw her Royal Highness after twenty-three long hours of arduous and painful labour and illness, on his arrival!*—And then only when she was breathing her last:—a distance of time of *forty hours* after unfavourable circumstances had induced Dr. Croft to write the letter. I have fully ascertained the fact, that Dr. Sims never entered the room until called up by the nurse, when *she* discovered that the Princess was dying.

With regard to the progress of the labour, we were led from the first bulletin, dated at eight o'clock Wednesday morning, to form the most favourable conclusions. That bulletin, as well as the subsequent ones, was signed by Dr. Sims and Dr. Baillie, from the *ipse dixit* of Dr. Croft only, Dr. Sims not having seen the patient.—So much for bulletins! With regard to Dr. Baillie's signature, from a long knowledge of the abilities and integrity of his brother-in-law, he might have had sufficient confidence in him to put his name to any paper he chose to suggest; but why Dr. Sims should sign this official dispatch, I am at a loss to imagine. Whoever has had much experience in the practice of midwifery must be aware, that no such document could be thus attested without the attesting person having examined the patient. His name is also made use of in various documents, as attesting the well-doing of the Princess.

Notwithstanding the labour was so long protracted, and the pains so strong, it has been admitted that no assistance was administered, but it was left wholly to uncertain nature to accomplish; and that nature it also ap-



pears, in fulfilling its task, became so far exhausted that it was unable to re-act after the contest was ended. The obstruction was not on the part of the mother, as the pelvis was capacious; but the bones of the head of the infant were more ossified, and the sutures more firm than usual, and therefore occasioned an obstruction to the completion of the labour.

The propriety of aiding the pains in assisting them to overcome this slight difficulty was, I understand, frequently discussed by Dr. Croft and the other physicians, although the latter, I will not allow, could give any substantial opinion: but still it was determined to abstain from all aid, and to try the efforts of nature to the utmost—circumstances at once convincing, that there were doubts on the propriety of the measures to be adopted, and which from the high rank and national importance of the patient, ought not to have been decided upon by the opinion of any one person, however great he might have been.

Before I proceed farther, it may not be improper to make a few observations on another point, on which there has been so much contradiction. There appears to have been attached to this particular case so many absurdities of the *feminine* kind, that really it requires some patience to separate the truths from the falsehoods, and the probabilities from the improbabilities. I allude to the probable cause which led to the death of the Infant, and the time of its death.

The first authenticated dispatch from Claremont informs us “that the child was then (Wednesday morning) living.” We are then informed by a public paper, “*Even up to a few minutes before its birth, it was ascertained to be living.*” But the same paper, in a subsequent part of it states, that since writing the above they were enabled from accounts transmitted in a moment of less confusion, to add a few more particulars, and *were authorized to make a few corrections in those already received.* It is

then asserted in one part, "it was *suspected* in the forenoon of Wednesday that the infant was dead;" and again, "*In short it had been perfectly ascertained for some time before the birth, that the child was dead*"! And speaking of the ineffectual attempts to resuscitate it—"In fact, it was dead before it entered the world. The experiment was therefore only made to leave *nothing undone*"! This paper also contradicts, by authority, the statement of Sir Richard Croft being gone to bed when the deep penetration and superior skill of Mrs. Griffiths, the nurse, first discovered the dangerous symptoms in her royal mistress; and asserts that he was never out of the room for more than ten minutes together during the whole time—of which more hereafter.

Several important questions here arise. In the first place, I, for one, should very much like to know by what means this practitioner "*perfectly ascertained that the child was dead for some time before the birth*"? as I could in some instances deduce considerable practical advantages from the possession of such a knowledge.

In cases where a child has been dead several days, where it is not perfectly formed, or where the presentation is other than natural, I admit that this circumstance may be discovered: but in a case of natural presentation of a full grown healthy child in the advanced stage of labour, and when the child has recently been ascertained to be living, circumstances admitted in this instance, I most positively deny, and that too without the fear of contradiction, that any practitioner, however high he may be, can by any means whatever fully ascertain that the child is really dead, notwithstanding there be a complete absence of the usual signs of life for a considerable time before the delivery. It is the language of ignorance and deceit. It is often made use of to cover unpardonable, rash, and hasty practice on the



one hand, or the ineffectual application of resuscitating means on the other. It is language, which is to be found in the mouth of every old woman who practices midwifery, especially in cases of the latter description; and may not statements of this kind favour such practices in future, and thus bring the science of midwifery into disrepute?

I have met with many instances, in cases of extreme labour, where from the long absence of the usual signs of life, I have had reason to fear the infant was dead; but generally have been agreeably disappointed by the stout crying set up at its birth.

These considerations lead me to speak of the general causes of the death of infants, and suspended animation during the progress of labour and at the time of birth.

Of these I can conceive but very few; I am speaking of a case in which a child is ascertained to be living in an advanced stage of the labour. One cause which I conceive may occasion the death of an infant, is in cases of extreme labour, when there is a considerable disproportion and difficulty, and the head becomes so much depressed and moulded, forming what is called, a sugar loaf head; or otherwise, that the functions of the brain may be obstructed, and life suspended or destroyed. I have every reason to believe, that cases of this kind, however desperate, very rarely occasion death, although they may tend to facilitate a suspension of life at the time of birth, by the natural debility and obstruction occasioned. Every old nurse knows the great number of children born in this state, and how soon they recover. The next cause which I conceive may occasion the death of infants in the latter stage of labour, is in cases where from its long continuance, or violence, the patient becomes so far exhausted as to render the circulation which serves to support the child, torpid and languid. This too, although it may also be a means of accelerating suspended animation at the time of birth, I believe is

very rarely the cause of death before that event happens. The most usual cause of still-born infants arises at the time of birth ; and it is more likely to take place in the cases which I have mentioned than others. It is owing to obstruction in the circulation, the consequence of pressure on the circulating medium, and life is thus often completely suspended. The child when born lies like a dead mass, without the least appearance of life whatever.

I must now revert to the circumstances of the labour, from this unavoidable digression, and speak of the re-animation of infants hereafter.

Let us then argue the case fairly, like men of science, and philosophers ; and let us admit for the moment, that Dr. Croft has been more favoured by Divine Providence than other men, with an acute penetration and profound knowledge ; and that he really did ascertain for several hours previous to the termination of the labour, that the royal infant was really dead. I should very much like to know why this knowledge was not converted to some good practical purpose—

“ Which known, would all his fruitless troubles spare.”

If the infant died from violent compression of the brain, the result of an extreme labour, or from the exhausted state of the royal mother, and that too for many hours before the delivery, was it a proper case to leave to the efforts of nature ? And why was not the advice of Dr. Sims taken immediately that discovery was made ? And why were not prompt measures immediately taken to extricate her Royal Highness from her sufferings, and that danger which in any such case must have been apparent ?

It must strike every practitioner in midwifery, that if an infant be really dead, that circumstance alone must greatly protract the labour ; for whilst the resisting powers act equally strong upon a dead infant, the propelling powers, from a want of firmness in its substance, are



inefficient in their efforts. Besides this, what object can a practitioner have in view in protracting a labour, already long indeed protracted, when he has ascertained the child to be dead?—the patient perhaps already worn out and exhausted by violent pains existing for whole days and nights together, and one pain in some cases would seem to a person unacquainted with them almost sufficient to destroy life. What object, I say, could he have in view, when he could in a moment by a little artificial aid, allow the labour to be immediately terminated, without scarcely another pain; and thus snatch his patient out of the reach of that danger which would await her.

No one can possibly believe that this accoucheur would put to the hazard both, or either of the lives of these royal personages, to satiate an ambitious passion, for the honor he might acquire in accomplishing it himself in case he should prove successful! But we are told, in reference to the non-admission of Dr. Sims, that Dr. Croft was fearful of alarming her Royal Highness by introducing him into the room.

In the commencement of labour, more especially the first, this circumstance has often the effect of paralyzing the pains; but after many hours hard labour the contrary is the case. The patient is then exhilarated at the sight of any person whom she thinks can render her assistance in her afflicting state.

Although the pains continued strong during the whole of Tuesday and the following night, little progress was made in the labour.

During the whole of Wednesday the labour pains continued very strong also; and in the course of the afternoon of that day the obstruction which had existed to the passage of the head at the brim of the pelvis was overcome by the pains, without any assistance whatever. Their long continuance must, of course, have very much

exhausted the Princess's strength. The head then passed into the vagina, and at five o'clock in the evening a bulletin was issued stating, "that within these last three or four hours the labour of her Royal Highness has considerably advanced, and will it is hoped, within a few hours, be *happily* terminated."

Might not this difficulty have been overcome at least three or four hours sooner, without suffering so much strength to be exhausted in the accomplishment of it, by a little careful aid? But then we are told that Sir Richard Croft prognosticated that the pains alone would be sufficient to accomplish the labour. He was right for once; they were so:—but where was his reserve of vital strength? Did Sir Richard Croft give that important subject a consideration? Or did he overrate the Princess's strength? Or did the state of the pulse, and other signs of strength, deceive him?

After the head had passed into the vagina, the Princess no doubt was so much exhausted, that all muscular resistance must have been at an end; and consequently there could have been but little difficulty on that account in safely terminating the labour in a short time. Why was not this accomplished in a much shorter space than four or five hours after the head had passed into the vagina? During this time the strength must be exhausting very fast; and it is probable, in the then exhausted state of her Royal Highness, that the pains must have fallen off very considerably; and as they were alone to complete the business, they would take a long time in doing it. The labour was however ultimately accomplished by the pains; and although we have ample proof that it had been long and painful, and that the Princess was very much exhausted when the child was born, we have still a bulletin issued in the very face of danger, nay even in the face of death itself, stating that "*Her Royal Highness is doing extremely*



well"!! signed by three physicians. The ministers of state left Claremont on this assurance, and ALL the doctors retired to rest !

The head of the child, when born, was found somewhat depressed, but inconsiderably so, and was somewhat larger than usual.

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*Of the Means used to reanimate the Royal Infant, compared with other Methods.*

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It is asserted, not only in authentic printed documents, but also by information on which I can rely, that after the birth of the still-born infant, *it was conveyed to Dr. Sims and Dr. Baillie in an adjoining apartment; and that the most approved means for restoring animation were resorted to by them, such as rubbing the body with salt and mustard! but without success!!* And when their efforts failed, THEN it was asserted that "*the child had been dead for some hours before the delivery took place*"!!

I have before endeavoured to illustrate, that the general cause of suspended animation in still-born infants does not take place till immediately at the time of birth; and that in such cases they are born dead to every manifest appearance, in consequence of the obstruction which takes place in the circulation at that time.

Notwithstanding they have every appearance of being dead, there is one organ which still retains its vitality, as in drowned persons, or other cases of suspended animation; and that is the heart, which if taken prompt advantage of, life may be rekindled, and animation again restored.

The application of remedies to resuscitate still-born infants will not admit of the delay of a single instant; for

if the excitation of the heart be suffered to be lost, all efforts will prove futile. Why then, if it were *known* to these accoucheurs that the child had been dead some hours before delivery, were any means whatever used to reanimate it, when they must have known they would be nugatory? Or, supposing there were any doubts upon the subject, or in point of fact animation were merely suspended in the usual way, I am at a loss to understand why the circulating medium should have been divided before the resuscitating process had been tried. For what can give such powerful aid in restoring suspended animation in still-born infants, as this vital fluid circulating to the very heart of the infant from the mother? And why was the infant conveyed into an adjoining apartment, perhaps exposed to cold air? all of which would create considerable delay, and allow that little action of heart at the first instant remaining, to cease for ever!

But it has been told, as an excuse for this practice, that in this instance it was adopted that her Royal Highness might not know the child was dead, fearful of alarming her! Supposing then this precaution really were taken, and the life of the infant risked for fears which could only exist in the powerful imagination of Sir Richard Croft, I should be glad to know, by all that is wonderful, why the Princess was so soon afterwards informed of it, in her truly alarming state? For in the first letter published in the papers from Claremont, we are informed that “throughout the whole of this long and painful labour her Royal Highness evinced the greatest firmness, and received *the communication* of the child being dead-born with much resignation.” The second says, “her Royal Highness, after her delivery, had expressed herself resigned to the child lying dead.” Another adds, “Her Royal Highness had previously expressed herself perfectly composed after receiving the intelligence of the infant being still-born.” And the



paper which states, it had received intelligence which it was authorized to communicate, says, "The Royal Mother bore her disappointment with fortitude and pious resignation." Then we are told that the infant was well rubbed with *salt and mustard*, as being the most approved remedies for restoring suspended animation!! This is the first time I have heard of these approved remedies for this purpose; and my dulness of comprehension will not permit me to understand by what kind of *modus operandi*, or by what magic, their effects can be so instantaneous as to meet the exigencies of the case. Beside, a considerable delay might occur in sending down to the kitchen, and in looking for these culinary remedies, which, added to the time so cruelly and fatally lost in applying the ligatures, dividing the funis, and conveying the infant into another apartment, would prevent the possibility of success.

Our practice in these cases ought to be ready, energetic, and the means instantaneously applied. Different practitioners adopt different plans. Some, if they find the pulsation in the funis has ceased, will divide it, and immerse the child in warm water, &c. In this way you lose the assistance of the circulation, and some time must elapse in tying the ligatures, dividing the funis, and in getting the water of a proper heat and in proper quantity.

The way I have found most successful, is to let the child remain, and instead of dividing the funis, carefully to keep up the circulation during the whole process, and waste no time in useless matters. To apply heat to every part of the body, by heated flannels; but as they can seldom be procured with sufficient quickness, they may be wrung out in quick succession in hot water, an article which is usually ready on such occasions.—To convey air into the lungs by means of a tube, or even with the mouth, making alternate pressure on the chest

to imitate respiration.—To use friction over the body, more especially the chest, and occasionally a good shake or slap.—To pour small quantities of spirits into the mouth, and to rub the lips, nostrils, &c. with volatile spirits. After using these means for a longer or shorter period, with the utmost activity, the child will generally heave a solitary sigh; shortly afterwards another; and by perseverance he will soon begin crying, to the no small astonishment of the females present, and great joy of the mother, who will generally evince the most lively pleasure at the pains taken to resuscitate her supposed departed infant: and should they prove ineffectual, a case which will very rarely occur, she will be perfectly satisfied as to the event, having herself witnessed that every effort was made to save it.

After the child has cried stoutly, I have then, and not till then, applied the ligatures, divided the funis, caused the child to be wrapt in warm flannels, and some warm food to be given to it.

I have met with several instances, in which these means have been persisted in for twenty minutes, or half an hour, before the least signs of returning life have appeared.

What would be the usual results of a contrary practice, (more especially if the child were conveyed into an adjoining apartment, probably exposed to cold air, and several unavoidable delays,) I am unable to say; but the case before us is a striking instance of its futility; and I have no hesitation in saying, that it is a practice founded in error; and I cannot avoid conceiving, that its termination in the same way must occur in most instances.

When an infant is born in this state, it is an important moment; and if there be a case in midwifery in which two practitioners can act with advantage, it is in this instance. In attending people in humble life, a practitioner is obliged to do as he can; but I have often la-



mented, on some of these occasions, that so much should devolve upon one person; and if there had been another practitioner in an adjoining room, I certainly should often have availed myself of his assistance, to take a part in these arduous proceedings.

Why then, (if Dr. Sims's attendance could not have been serviceable before,) he was not now called in, and why the resuscitating process was not tried in the chamber of the Princess, where it could alone bid fair to be successful, we have no sound scientific or philosophical reason given us:—here, too, at this critical juncture, one practitioner might have been proceeding with the resuscitating process, whilst the other was attending upon the Princess, who would stand in need of considerable care; but, in humble life, the patient is unavoidably neglected to attend wholly to the child.

Had an old midwife happened to have the management of the case, some chance might have been afforded for the recovery of the infant. She would have poured half a glass of spirits down its throat the instant it was born, *sans ceremonie*, and given it a few severe slaps on the posteriors, which probably might have stimulated and caused the little stranger to sneeze, and cry!

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### *Of the Placenta.*

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It was at first imagined by many that an extraordinary difficulty had occurred in this respect, and that a violent hæmorrhage was the result of it. I have however ascertained, that the Placenta was extracted about half an hour after delivery, which is the usual time; and that no such event, or any untoward occurrence, took place on that account.

*Of the Events which occurred subsequently to the Princess's Labour.*

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After the labour was *thus* completed, and the Princess informed of the death of the child, a communication certainly, which under all the circumstances, might have been dispensed with, we find ourselves enveloped in one continued cloud of darkness, as to the direful events which succeeded, and which convey us to the close of the melancholy scene. We must therefore feel our way in the dark, and endeavour to reach the best facts we can come at.

It is asserted then, not only in the bulletin, which states that the Princess was doing extremely well, but in other documents, that the physicians considered her Royal Highness doing so well that the Members of the Privy Council left Claremont at 11 o'clock for London. Indeed they must have had this assurance from the physicians who had attended the Princess, or I should imagine they would not have left Claremont that night, more especially as they had to return, on the danger being discovered *by the nurse*.

The first account we have of the state of the Princess after her delivery, in addition to the bulletin, is contained in the first public dispatch, or letter, from Claremont, which states that "the Princess was *composed* after her delivery, and though of course much *exhausted*, every hope was entertained of her doing well." The second states, "that she continued remarkably well from nine o'clock, the time of her delivery, till past twelve o'clock, probably a quarter past, when *the medical gentlemen, Drs. Baillie, Croft, and Sims, considering that she could not be doing better under the circumstances, retired to rest.*"!



This leads me to another disputed point ; namely, whether Dr. Croft really was or was not gone to bed ?

In the attendance upon a personage of such high rank, and knowing the casualties which sometimes do occur in cases of this kind, there can be no doubt that it would have been prudent for one of the physicians to be in occasional attendance upon the Princess, in a distant part of the room, the whole of that night ; and to have relieved each other as occasion might require. But it is of little or no consequence whether Dr. Croft was in or out of the Princess's chamber at the time specified ; there is no particular question depending upon that circumstance, as it has been clearly admitted that the danger was first discovered by Prince Leopold and Mrs. Griffiths. In these dispatches it is asserted, that the nurse, considering her Royal Highness's complaints to require the advice of the medical gentlemen in attendance, *the Doctors were ALL instantly called up.* Now if Dr. Croft *really was not gone to bed, but was in the room*, one would imagine there would have been no occasion for publishing Mrs. Griffiths's opinion, as she could instantly have communicated with Dr. Croft in a distant part of the room ; or that Mrs. Griffiths should call up ALL the Doctors. But whether Dr. Croft was gone to bed, or composing himself in an arm-chair by the fire-side, I say it is not of that consequence to dispute about ; though I have every assurance from Claremont, that he was gone to bed.

Of the state of the Princess after delivery, we were prepared from the long protracted, and I may add, severe labour, which she had so long endured, and which nature was suffered to terminate, to conceive her to be in an exhausted state. The first dispatch tells us that "she was composed, but of course much exhausted."

Now, either when Dr. Croft gave that assurance to the cabinet ministers, and issued that memorable bul-

letin attesting the well-doing of the Princess, and retired to rest (as it is said), the Princess was not so much exhausted as we were led to conceive, and no danger was to be apprehended on that account; or else there was very great danger from the moment of the delivery.

We have heard much of the Princess being so much composed after delivery. Is not this a strong symptom of exhaustion? So much so, we are informed in a dispatch from Claremont, that at past twelve o'clock, Drs. Baillie, Croft, and Sims, retired to their bed-rooms, and that her Royal Highness wanted no more assistance than Mrs. Griffiths, the nurse, could render her during the remainder of the night!

I should much like to know what nourishment was given to the Princess after completing this arduous contest, to stimulate the system to reaction, before she was thus suffered to compose herself, and become unable to swallow, as well as to support her strength during the different periods of the labour, in addition to the *watergruel*?

Throughout the whole course of these unfortunate proceedings, there does appear to have existed so many frivolous precautions and fears, which have been carried to such an extraordinary length, that I doubt not great precautions were taken also, by extreme slender sustenance, to avoid fever and uterine inflammation; that is, however, in all cases a secondary business; the first consideration is to support the patient, adequate to the degree of exhaustion: to keep up a proper equilibrium; otherwise there will be no vitality left for inflammation or fever to act upon. Life itself is the primary consideration; imaginary disease at a remote distance, the second. In this case all was novelty, deviation, and vain timidity, if not indecision; and all was unsuccessful. Fashion in midwifery cannot be changed at pleasure. The Princess and the Cottager ought to be treated upon the same principles. Nature and Science know no distinction.



*Of the Calamitous Symptoms which took place previous to the Dissolution of her Royal Highness.*

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It is said that the nurse, having retired into a small room adjoining that of the Princess, to be in readiness if wanted, Prince Cobourg remained in the room sitting by the bed-side; as it was supposed by the Doctors it would be the means of tranquillizing her Royal Highness. His Serene Highness observed that alteration in her voice and countenance which induced him to call the nurse, instead of the Princess's calling her, as before stated.

This was a little before one o'clock on Thursday morning. Mrs. Griffiths the nurse, went to administer some gruel to her Royal Highness, and she expressed herself to find a difficulty in swallowing it. The Princess shortly afterwards complained of being very chilly, and of a pain at her stomach and chest, which it is said "proved to be spasms;" her quiet left her, she became restless and uneasy, and experienced considerable difficulty in respiration. In fact, the nurse considered "the Princess so unwell that she thought it her duty to call the medical gentlemen, who lost no time in repairing to the Princess's bed-room." In the early part of the commencement of these unfavourable symptoms, the Princess in a faltering voice said, "Am I in any danger?" And the medical attendants desired her to compose herself! Her Royal Highness continued in this dreadful state till about two o'clock. The *Spasms*, so called by the learned Doctors, are then said to have ceased; she fell into a calm without speaking, supposed to have lost the power of speech, but appeared perfectly sensible and composed, and that her dissolution was ap-

proaching. "Nature and life (it is said) became quite exhausted, and she expired at two o'clock on Thursday morning."—Some accounts say, at half past two.

It is said that the united skill of the medical gentlemen was exerted to the utmost, but with no avail.

I cannot close this painful recital without making a few remarks.

Whoever has seen a person dying of extreme exhaustion, not caused by severe labour in particular, but by any previous illness, and will compare the symptoms attendant upon dissolution with those in this dreadful instance, will readily agree, that they were symptoms the consequence, not the cause, of some prior dangerous derangement of the system. What are the symptoms of a person actually dying in an exhausted state? Pain in the chest, difficulty of respiration, coldness, an agitation of the body, a fear of suffocation, restlessness, throwing the arms about, &c. That the Princess died in consequence of extreme exhaustion, from previous causes, of which those fatal symptoms were merely the sequel, no man of any experience can doubt; and that that exhaustion must have arisen from *a long and arduous, and I will add, difficult labour, suffered to be completed by the efforts of nature.*

But we have been told these symptoms were *Spasms*; and that her Royal Highness died of strong *Spasms*! With respect to the term *spasm*, it is a term in general use, but there is none so often misapplied. The learned gentlemen seem to have taken an advantage of the present fashionable "*penchant*" for this term, by using it as a means of foisting the death of their unlucky patient upon the public, and thus rendering that lamentable circumstance more palatable.

I should also much like to know even when the alarming symptoms just described were discovered, which foiled their united skill, what was the treatment resorted to,



beside a little weak brandy and water administered by Sir R. Croft? When the unfortunate Princess inquired of them if she were in any danger, why did they desire her to compose herself! Was this a time for composure? Ought not a patient found in this state to be treated with instantaneous energy, instead of composure? I may be thought rash, but I speak from experience: this was a case of life or death; and I would ask, Were brandy, æther, hot wine, and other stimulants and cordials administered in large quantities? For here was required a powerful and immediate excitement. It may not be improper to observe, that I recollect some years ago a case of a person attacked with all these deadly symptoms, the consequence of exhaustion, from a long continued painful illness, though not of labour, with the addition of coldness of the extremities, a gasping for breath, a deadly coldness internally, &c. that recovered, from an active and powerful treatment of this kind, and is now living and healthy. In this case, wine, brandy, æther, &c. were administered in incredible quantities, without the patient feeling their effects; and this ultimately succeeded in producing a re-action of the system, and thus snatched the patient from death. We ought always to measure our remedies with the exigencies of the case. Instead then of advising her Royal Highness to compose herself, why were not stimulants poured down her throat?—she being then unable to swallow without.

I perfectly agree with the publishers of some of these *authorized* statements, that “this lamented death can only be accounted for by presuming that the constitution was exhausted by severe and protracted pains, and nature sunk beneath the struggle.”

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*Of the Result of opening the Body of the Princess.*

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“ Nothing (says a document from Claremont) was discovered by inspecting the body to account for the demise of her Royal Highness. The small quantity of serum found in the pericardium not accounting for it ; so that it must have arisen from the *exhaustion* of the Royal Patient *under a period of labour so lingering.*”

The uterus, vagina, and abdominal muscles, were found particularly flaccid, and the mouth of the uterus had not contracted—proofs that their action was gone from the moment of the delivery. Some coagulated blood was also found in the uterus, but inconsiderable ; I should presume, no more than might naturally be expected. It has been said, that Sir Richard Croft conceived that after the labour the uterus was acting irregularly, and contracting in the hour-glass form ; and that this induced him to hurry away the placenta. But nothing was discovered on opening the body to confirm this opinion.

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*General Remarks on the most safe and successful Way of treating similar Labours.*

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The practice of Midwifery, no great number of years ago, was wholly in the hands of women ; it is now principally in the hands of men, and it will be their faults if ever it reverts from them.

Midwifery was not then cultivated as a science, but was in all cases left entirely to nature to accomplish, as in the unfortunate instance before us. From the very considerable number of women and children continually dying during child-birth, and various other accidents



happening, men turned their attention to this important subject. From this epoch it has been studied as one of the sciences, with an ardour which reflects equal credit and humanity on the researches of those who have cultivated it. The improvements which have been thus obtained are such, and the obstetric art is now brought to such perfection, that even in the most extreme cases of Laborious Labour, the practitioner is presumed always to have it in his power to save the life of the mother, and in Laborious Labour, the life of the child also, in the greater number of instances. In short, the practice of Midwifery is now so far perfected, that it is become an opprobrium for a practitioner to lose a patient, either undelivered or after parturition is terminated, unless it can be accounted for by some very extraordinary circumstances indeed. Yet it appears we have now to lament, and to inquire into the cause of the death of both a Princess and her Infant, in a common Natural Labour, scarcely amounting to the *milder degree* of Laborious Labour! which has not been accounted for.

Labour is divided into several kinds: as *Natural Labour*, *Lingering Labour*, the *Milder Degree of Laborious Labour*, *Laborious Labour*, and the *Extreme Degree of Laborious Labour*; in all of which the head presents, but varies in the degree of difficulty or other circumstances; and *Preternatural Labour*, or cross-birth, which is when any part presents except the head.

*Natural Labour* is happily the most frequent, and can be safely terminated, in most instances, without artificial aid.

*Lingering Labour* can be safely terminated in general in the same way; but various causes retard its progress.

The *Milder Degree of Laborious Labour* is of the same kind as the two preceding; but some cause obstructs the termination of it, such as a disproportion in the size of the pelvis, a greater firmness in the bones

of the head in some infants than in others, the head being larger, an unfavourable position, &c. In all these cases, although the pains may be very strong, yet the labour will make but little, and sometimes no progress, for a very considerable time. The head pitches upon the pubes, and the pains merely serve to force it more violently against that bone, till it become moulded to enable itself to pass. In women of very strong and robust constitutions, the strength of the pains, and their long continuance, will usually overcome this difficulty in time, without danger of the patient sinking afterwards from exhaustion; but it would be otherwise in many cases of the same kind in women of delicate constitutions: in these too the pains, by a very long protraction, may possibly overcome the difficulty, if the patient does not become so far exhausted that the pains cease. And this is the more probable, because when the patient is worn out by long protracted and violent labour, probably without rest, or ability to take much sustenance, the muscular resistance becomes flaccid, and presents little resistance to its termination. But what is the consequence? Not an iota of strength is reserved for the *then* completion and contingencies of the labour, and re-action of the system after it, and the patient will in all probability sink under a state of extreme debility in a few hours, unless perchance she happen to be in those hands that would, at the risk of subsequent fever and inflammation, so drench her with an overcharge of spirituous liquors, as might possibly, by stimulating the system, keep up animation.

It would be bad and unsafe practice to leave a labour of this kind wholly to Chance, without duly considering its effects upon the constitution. The life of the patient would be thus unnecessarily put to risk, when she might be delivered in due time with the greatest safety



possible. Every accoucheur who really understands the rudiments of midwifery, ought to act according to the circumstances and exigencies of the case, rationally and decisively.

In a case of this kind, a safe practitioner will keep a sharp eye on the strength of his patient. He will keep up that strength as much as possible by nutriment, such as beef tea, and occasionally a little diluted wine, or even brandy and water. He will ascertain the nature of the difficulty, and the probability of its being overcome by the pains, and the quantum of strength his patient has to part with for completing the arduous task. The constitution of the patient, the state of the pulse, the strength and duration of the pains, the rest and nourishment taken, &c. will serve to guide him in this particular; and as there is usually abundance of time for consideration, he will weigh all these circumstances in his mind. He will not adopt any rash and inconsiderate measures to save himself time or trouble, and hurry over the labour, nor be induced so to do by any importunities of the patient, or persons who are about her. Probably the mere alteration of the position of the head might remove the difficulty. If the practitioner be convinced that the difficulty cannot be overcome by the pains, or at least without risking the life of his patient, or if the strength begins to flag, he will then see the necessity of aiding nature in the completion of the labour. There is no point in midwifery that requires more sound judgment, more reflection, and more decision, than to ascertain during the progress of labour the time when it is proper to act, and when to refrain from it.

A practitioner who has had but little experience will sometimes find himself embarrassed in forming a substantial opinion upon these points. Timidity and indecision we must often expect to result from inexperience, and thus a case may be left to nature too long, with

the addition of the water-gruel system carried to its fullest extent to avoid fever and inflammation. The labour may be accomplished by such a treatment; but the patient will perish.

I never knew a case of this kind, treated with decision and timely assistance, but what terminated favorably. In point of actual management, it is a case of labour which I consider next in succession, in point of simplicity, to the most common labour, for a practitioner to treat; and if I were asked to select one for a young man just returned from the lecture rooms of an obstetrical teacher, flushed with his newly acquired knowledge, in order that he might try his skill as a practical accoucheur in a case a little out of the common way, to lead him on step by step to the more difficult, this is the very one I would recommend; and I should have but a sorry opinion of the use he had made of his time, if he did not give a favourable account of the result of it.

These considerations lead me to the means necessary to be employed in terminating this kind of labour, when it cannot be safely completed by nature.

The public, unfortunately, appears to have a kind of dread of artificial aid in the practice of midwifery; It is for want of its being understood; they suppose it to intend some violence to be done either to the mother or the infant. This is not the case. There ought never to be any injury done to the mother, in using artificial assistance, nor to the child, in the milder degrees of Laborious Labour. Seldom, even in Laborious Labour, but in the extreme degree; it sometimes becomes the painful duty of the accoucheur to destroy the child, in order to save the life of the mother.

The language used by the gentlemen concerned in the unfortunate affair at Claremont, is ill calculated to correct the public opinion in this respect; for it is asked,



if Sir Richard Croft had deemed artificial aid necessary, could he, in the absence of the Royal Parent, and all the members of the Royal Family, take upon himself the *awful* responsibility of doing it? This language certainly would imply something very dreadful indeed;—language calculated to cause hysterics in any delicate female. If artificial aid becomes absolutely necessary, and a practitioner does not employ it, does he not “take upon himself” a greater “*awful* responsibility” in not doing his duty? In not adopting decisive measures to save his patient, in short, does he not take upon himself the “*awful* responsibility” of letting her perish for want of that aid which it was in his power to administer?

When the practice of Midwifery was taken up by men, as a science, it was often lamented, that in this kind of labour, and in Laborious Labour, some contrivance could not be invented which would give the practitioner that command over the head of the child, whereby he could assist the pains to terminate the labour, without any injury to the mother or child. This desideratum was at length happily accomplished. These are in fact not sharp cutting instruments, as many imagine; they are no more than artificial hands. They can be introduced into the pelvis with much facility, when the hand cannot be made to act with sufficient power. Instead of increasing the bulk of the head, by their slight pressure they diminish it, and give the practitioner an absolute command over it.

The accoucheur is thus enabled to assist in the completion of parturition as much in one pain, as the pains alone probably could do in fifty. In cases, therefore, in which a labour cannot be terminated without risk, or where the patient is becoming exhausted, by a little timely assistance you may preserve that strength which without such assistance would be expended. The

strength being thus kept up, not only serves for completing the labour, but also leaves the patient sufficiently strong after it is terminated.

The excellency of these contrivances is such, that they give no additional pain whatever to the mother; and in dextrous hands, seldom or never injures the child.

The benefits resulting from this timely assistance are, that the lives of neither mother nor child are risked, as they must otherwise necessarily be. These means may be, and usually are adopted, without informing the patient of it; and I should have but an indifferent opinion of an accoucheur who could not thus accomplish a labour without its being known to the patient, who, after long sufferings, will always be grateful for being extricated out of them.

*Laborious Labour* requires to be treated in the same way; but there is more difficulty. The greater degree of *Laborious Labour* occurs only in deformed women; and it sometimes becomes necessary to destroy the child, in order to save the mother: but with respect to these, and *Preternatural Labour*, it would be foreign to the object of this Essay to treat.

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### *Remarks.*

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In taking a review of this unfortunate case, several considerations present themselves, and several questions arise.—Had the Princess, during the course of these proceedings, the benefit of that quantum of medical ability which a person of her Royal Highness's rank ought to have? or indeed which any person of the most humble rank ought to have? Secondly, Was the case treated with that skill, decision, and prudence, which the nature of it



demanded? And lastly, What was the cause which led to the melancholy conclusion of it?

Mr. Neville, a surgeon of Esher, as we are informed, was desired by Sir Richard Croft, a few days before the labour, to take some blood from the Princess's arm; and it is said several prior blood-lettings had been resorted to. Four punctures were made—present Sir Richard Croft, and no vein opened!! If Mr. Neville *did* find a vein, how could he fail in four attempts? Or, if he did *not* find a vein, is it possible that he could puncture her Royal Highness's arm four times, or even once, at random? I never knew an instance where a vein was not to be discovered by the sight or the touch, however surrounded with adeps. Why did not Sir Richard Croft try his skill as a phlebotomist? Blood was however ultimately taken from a vein on the back of the hand.

Of the impropriety of these blood-lettings as creating debility in a constitution like that of the Princess, I have before spoken. In justification, however, it is said that her Royal Highness had become corpulent. Be it so: but I must take leave to deny that corpulency is any proof of strength. On the contrary, corpulent persons cannot sustain either so much fatigue, or so much pain, as thin and muscular persons will do. It is said, that Sir Richard wished to diminish the mass of blood on account of this fatness!! In labour, there can be no doubt but fatness must greatly retard; nay, even obstruct its progress on several accounts. It might also be said, that it is the modern practice to abstract blood a short time before, and even at the commencement of labour, with a view of relaxing the *cervex uteri*, &c. and thus considerably to take off its resistance. All this I grant; but that part of the profession who dare take the liberty of thinking and acting for themselves, are not always to be led astray by novelties. In some cases, especially in women of a strong and robust constitution, or those who

are advanced in life on having their first child, much muscular and uterine resistance may be apprehended; and in such cases, no doubt, blood-letting would be proper and useful. But in a very young patient, of a debilitated habit, such resistance is not to be expected; and blood-letting cannot be employed without danger. And in corpulent persons, where there are no symptoms of plethora, as was the case here, it must debilitate much more than in muscular subjects.

I have before observed, that Sir Richard Croft, Dr. Baillie, and their friends, boastingly say that their names stand so *high, and eminent*, that every idea of an investigation is ridiculous.—So did Sir Lucas Pepys and *his* friends; but our Imperial Parliament were not quite of this opinion, and found on his examination at their bar, that credit had been given to *this eminent* physician for much more ability than he had a right to lay claim to. Dr. Baillie was present during the greater part of the labour, an evening paper informs us, and that in point of ability he is second to no man in the kingdom. Dr. Baillie was certainly frequently in the Princess's chamber during the labour, and communicated from time to time the state of it to the Privy Council; but what have his abilities to do with this case? He is not a practical accoucheur, and therefore his eminent name could be of no consequence in this instance; at least it does not appear to have been so. He might understand the theory of midwifery; but the theory and the practice of it are widely different.

Of Dr. Baillie's abilities as a physician, I never either heard them questioned, or could learn in what particular they excelled those of other physicians; but he is unknown as an accoucheur. It is well observed, in a letter which appeared in a late paper, that "Practical Midwifery, it is well known, forms a distinct part of surgery, and is still more remote from the practice of physic. I



should apprehend, even the pulse of a woman in labour might inspire fallacious hope in the most experienced physician, not in the habit of attending such cases. The bodily anguish and peculiar mental agitation which a woman endures at those moments might stimulate the pulse, though dangerous exhaustion had commenced."

The same letter gives us the following surprizing information, which by the bye has not been contradicted. "Of her Royal Highness's two other medical attendants, one was never admitted into her chamber, though *the only one*, the public prints inform us, *capable of using instruments*"!!

Sir Richard Croft, then, was the only medical attendant who had the actual management and responsibility of the case. I have not been able to learn in what manner this gentleman's abilities have placed him on such an eminence as to set all inquiry and investigation at defiance! Sir Richard Croft practiced as a surgeon-apothecary in the country for many years; and subsequently, his *family* connections have advanced him into good practice in London as an accoucheur; but Sir Richard was never accused by the medical world of possessing any very extraordinary degree of science; and if of late years he has been the *fashionable* accoucheur, unfortunately he has not been the most *successful* one. It is my wish, however, to avoid observations of a personal nature, and irrelevant to the case.

Supposing Sir Richard to be that eminent practitioner which himself and his friends wish to inculcate, why does he shrink from investigation? Would not inquiry be sought for by any man of real ability, in order to re-establish his fame? But I would ask, Was there ability and penetration displayed in the propriety of blood-letting?—In witnessing that operation *thus* performed?—In the arrangements preparatory to the labour?—In the resuscitating process for the recovery of the

infant?—In determining on the propriety of leaving the labour wholly to nature, instead of rendering it assistance?—In the prognostic after its termination, that the Princess was *doing extremely well*?—Or in the re-animating means resorted to for the recovery of the Princess, when by mere accident the fatal symptoms were discovered?—Or in introducing a stranger at a time when life scarcely existed?

But it has been more than hinted at, that artificial aid really was found necessary, but could not be resorted to without leave of his Royal Highness the Prince Regent, who was down in Suffolk. The observations I have already made will reply to the absurdity of this pretence. No man will believe that his Royal Highness could give any such cruel instructions—that his daughter's life should remain in peril whilst a messenger should travel nearly a hundred and fifty miles for his Royal Highness's approbation, on a subject on which he must be unqualified to give an opinion. Nor will any man scarcely believe that there is to be found an accoucheur in all England, so destitute of humanity as to undertake a case upon any such terms.

If artificial aid was found necessary, why was this delayed till too late? And why this indecision? Is indecision a mark of high eminence? If this had been resorted to six or eight hours before the delivery took place, instead of witnessing a nation in deep mourning and affliction, might not the brightest prospects have now pervaded it, on the joyous prospect of a complete and uninterrupted lineal descent of the illustrious house of Brunswick?

Much stress has been laid on the circumstance of the Privy Council approving the measure of leaving the labour to nature. No doubt too, those gentlemen spoke as their feelings and humanity dictated. They relied, no doubt, on the high names and supposed un-



erring judgment of the medical attendants. The Privy Council are not, at least, practical accoucheurs, and therefore were unable to give advice, and I dare say would rather be excused from giving it on such a subject; humanity would naturally induce them to lean to the most mild measures, if they had the assurance of the medical gentlemen that these could be sufficiently confided in: and whether the labour had been safely terminated with or without aid, no doubt but the Privy Council would have felt equal pleasure in communicating to the Prince Regent the pleasing intelligence that both the Princess and her Infant were "*doing extremely well.*"

It appears more than probable, that the blood-lettings in a debilitated and irritable habit; the protraction of the labour, probably with a slender diet and want of rest; the long continuance of the head in one position during violent pain, only moulding itself to prepare to pass the pelvis, and no assistance being rendered it, account for the falling off of the pains for many hours before delivery; the debilitating effect of the usual discharge, in a patient already exhausted; the exhaustion of the nervous system, by informing the Princess of the death of her Infant, when she could not satisfy herself of any exertions made to save it; the permitting Prince Leopold to sit by the bed-side (who must equally have felt the loss) to condole with each other, and thus also prevent that repose which she would so much require in the irritable and susceptible state of her nerves, appears to account for that cessation of vital power which succeeded; and that this was increased by introducing a stranger (although no danger from such a circumstance was to be apprehended during the active stage of labour or at delivery); for her Royal Highness seeing so many persons flock around the bed-side with countenances ill calculated to animate, enquired, apparently much agitated, if she

was in any danger ; and the answer of Dr. Baillie “ We wish your Royal Highness to compose yourself,” was little calculated to allay that agitation. The Princess had no convulsions, as has been erroneously stated.

Thus, in a few hours after it had been certified that her Royal Highness was going on *happily, and extremely well*, an extraordinary gazette announced that this amiable Princess was no more !!!

But whether the Princess came by her untimely death through human ignorance or error, or whether it was so willed by Heaven, that man should not be instrumental in the distribution of its blessings in this particular instance, her Royal Highness is now happy, and beyond the reach of our sorrow ; and in the hour of trouble it must be peculiarly gratifying to her Royal Relatives and disconsolate Husband, to witness a whole nation partake with them in deep sympathy : at the same time the characters of the gentlemen concerned, the disturbed state of the public feeling, especially that dreadful alarm created in the female part of it, the blow which this event has given to the Science of Midwifery in public estimation, and the ominous advantage some fanatical enemies of the Crown have taken of the circumstance, demand that the case should not be passed over until its real merits be fully ascertained.

FINIS.







